



GP 2685

PTO/SB/21 (08-03)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

|   |    |                        |                        |
|---|----|------------------------|------------------------|
| <b>TRANSMITTAL FORM</b><br><br>(to be used for all correspondence after initial filing) |    | Application Number     | 09/838,055-Conf. #8644 |
|   |    | Filing Date            | April 19, 2001         |
|   |    | First Named Inventor   | Tomoaki Hokao          |
|   |    | Art Unit               | 2685                   |
|   |    | Examiner Name          | S. Trinh               |
| Total Number of Pages in This Submission  | 15 | Attorney Docket Number | G0126.0203/P203        |

| ENCLOSURES (Check all that apply)  |   |  |
|--|---|--|
| <input type="checkbox"/> Fee Transmittal Form                                | <input checked="" type="checkbox"/> Drawing(s)  | <input type="checkbox"/> After Allowance Communication to Group                            |
| <input type="checkbox"/> Fee Attached  | <input type="checkbox"/> Licensing-related Papers                                       | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences        |
| <input checked="" type="checkbox"/> Amendment/Reply                          | <input type="checkbox"/> Petition   | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final   | <input type="checkbox"/> Petition to Convert to a Provisional Application               | <input type="checkbox"/> Proprietary Information   |
| <input type="checkbox"/> Affidavits/declaration(s)                           | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Status Letter   |
| <input type="checkbox"/> Extension of Time Request                           | <input type="checkbox"/> Terminal Disclaimer  | <input type="checkbox"/> Other Enclosure(s) (please identify below):                       |
| <input type="checkbox"/> Express Abandonment Request                         | <input type="checkbox"/> Request for Refund   | <b>RECEIVED</b><br>MAY 28 2004<br>Technology Center 2600                                   |
| <input type="checkbox"/> Information Disclosure Statement                    | <input type="checkbox"/> CD, Number of CD(s) _____                                      |  |
| <input type="checkbox"/> Certified Copy of Priority Document(s)              | Remarks   |  |
| <input type="checkbox"/> Response to Missing Parts/Incomplete Application    |   |  |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 |   |  |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT |  |
|--|--|
| Firm or Individual name                    | DICKSTEIN SHAPIRO MORIN & OSHINSKY LLP<br>Robert Gingher |
| Signature                                  |  |
| Date                                       | May 24, 2004   |